U.S. Department of Labor Employment Standards Administration Office of Labor-Management Standards Washington, DC 20210

FORM LM-2 LABOR ORGANIZATION ANNUAL REPORT

MUST BE USED BY LABOR ORGANIZATIONS WITH \$200,000 OR MORE IN
TOTAL ANNUAL RECEIPTS AND LABOR ORGANIZATIONS IN TRUSTEESHIP

Form Approved
Office of Management and Budget
No. 1215-0188
Expires: 07-31-2004

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C. 439 or 440.

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.					
For Official Use Only 1. FILE NUMBER 2. PERIO	D COVERED MO DAY YEAR 3. (a) AMENDED — If this is an amended report correcting a previously filed report, check here:				
500L 500L 500L 500L 500L 500L 500L 500L	MO DAY YEAR filed report, check here: 0 1 0 1 2 0 0 2 (b) TERMINAL — If your organization ceased to exist and this is its terminal report, see Section XII of the instructions and check here:				
E PAS DADE Through	1 2 3 1 2 0 0 2 (c) SUBSIDIARY — If this is a report for a subsidiary organization of your union as defined in Section X of the instructions, check here:				
	8. MAILING ADDRESS				
ROBERT KRABBE (2) 529-982	First Name				
TEAMSTERS AFL-CIO 331	MOLLIE				
LU 2000AIRLIME DIVISION					
8009 34TR AVENUE SOUTH SUITE 250	REILEY				
BLOOMINGTON, MW 55425 12/2002	KEILET				
138 18 1 8 1 1 1 1 1 1 1 1 1 1 1 1 1	P.O. Box · Building and Room Number (if any)				
lddoblololobbbbb	2 5 0				
4. AFFILIATION OR ORGANIZATION NAME	Mumbas and Charat				
TEAMSTERS AFL-CIO	Number and Street 8 0 0 9 3 4 T H A V E N U E S O U T H				
5. DESIGNATION (Local, Lodge, etc.) 6. DESIGNATION NUMBE	R BOOS SAIN AVENUE SOUTH				
LU 2000	City				
7. UNIT NAME (if any)	BLOOMINGTON				
AIRLINE DIVISION	State ZIP Code + 4				
9. Are your organization's records kept at its mailing address? Yes No (If "No," provide address in Item 75.)	State ZIP Code + 4 M N 5 5 4 2 5 —				
75. ADDITIONAL INFORMATION					
Item Number					
Each of the undersigned, duly authorized officers of the above labor organization, declares, un accompanying documents) has been examined by the signatory and is, to the best of the undersigned by the undersigned by the signatory and the undersigned by the und	order the applicable penalties of law, that all of the information submitted in this report (including the information contained in any arsigned's knowledge and belief, true, correct, and complete. (See Section VI on penalties in the instructions.) GENERAL SECRETARY-TREASUR				
SIGNED: (If oth	er title, structions.) 3 27 03 202-624-6800 (If other title, see instructions.)				
Date Telephone Number	Date Telephone Number				

03-090-032 (529982)

Du.	ring the Reporting Period Did Your Organization:			18. How many members did your
10.	Have a "subsidiary organization" as defined in Section X of the instructions?	Yes	No X	organization have at the end of the reporting period? 19. What is the date of your organization's
11.	Create or participate in the administration of a trust or other fund or organization, as defined in the instructions, which provides benefits for members or their beneficiaries?	X		next regular election of officers? 20. What is the maximum amount recoverable under your organization's fidelity bond for a loss caused by any officer or employee of your organization? 5 0 0 0 0 0
12.	Have a political action committee (PAC) fund?		X	21. What are your organization's rates of dues and fees? (Enter a minimum and maximum if more than one rate applies for any line.)
13.	Acquire or dispose of any goods or property in any manner other than by purchase or sale?	X		Rates of Dues and Fees (a) Regular Dues/Fees S Per
14.	Have an audit or review of its books and records by an outside accountant or by a parent body auditor/representative?	X		(b) Initiation Fees \$
15.	Discover any loss or shortage of funds or other property?	X		(d) Work Permits N/A per (Month, Year, etc.)
16.	(Answer "Yes" even if there has been repayment or recovery.) Have any officer who was paid \$10,000 or more by your organization and also received \$10,000 or more as an officer or employee of another labor		X	22. During the reporting period, did your organization have any changes in its constitution and bylaws (other than rates of dues and fees) or in practices/ procedures listed in the instructions?
17.	organization or of an employee benefit plan? Liquidate or reduce any liabilities without disbursement of cash?		X	23. Were any of your organization's assets pledged as security or encumbered in any other way at the end of the reporting period?
				24. Did your organization have any contingent liabilities at the end of the reporting period?
	he answer to any of the above questions is "Yes," protem 75 as explained in the instructions for each item.)		tails	(If the answer to Item 23 or 24 is "Yes," provide details in Item 75.)

STATEMENT A - ASSETS AND LIABILITIES

FILE NUMBER: 5 2 9 - 9 8 2

Complete Schedules 1 Through 15 Before Completing Statement A

Enter Amounts in Dollars Only -- Do Not Enter Cents

	ASSETS Item	From SCH #	Start of Reporting Period (A)	End of Reporting Period (B)
	25. Cash		1 3 0 6 9 8 4	1 0 9 4 0 3 3
	26. Accounts Receivable		0	1 9 1 5 3 6
ST:	27. Loans Receivable	1	0	0
ASSETS	28. U.S. Treasury Securities		0	0
	29. Investments	2	0	0
	30. Fixed Assets	5	4 8 0 7 4	2 2 0 3 8 5
	31. Other Assets	3	1 1 0 0 5	1 0 0 8 7
	32. TOTAL ASSETS		1 3 6 6 0 6 3	1 5 1 6 0 4 1
	LIABILITIES Item	From SCH #	Start of Reporting Period (C)	End of Reporting Period (D)
	33. Accounts Payable		0	0
les Es	34. Loans Payable	8	0	1 0 8 0 0 3
LIABILITIES	35. Mortgages Payable		0	0
LIAI	36, Other Liabilities	4	0	0
	37. TOTAL LIABILITIES		0	1 0 8 0 0 3
	38. NET ASSETS (Item 32 less Item 37)		1 3 6 6 0 6 3	1 4 0 8 0 3 8

Complete Schedules 1 Through 15 Before Completing Statement B

Enter Amounts in Dollars Only -- Do Not Enter Cents

CASH RECEIPTS	From SCH #	AMOUNT	CASH DISBURSEMENTS	From SCH #	AMOUNT
39. Dues	3	4 3 0 3 8 0 4	56. To Officers	9	1 6 8 1 9 5
40. Per Capita Tax		0	57. To Employees	10	1 4 7 9 5 5 2
41. Fees		7 8 0 0	58. Per Capita Tax		7 8 8 9 8 2
42. Fines		0	59. Fees, Fines, Assessments, etc	 	7 0 5 6 8
43. Assessments		0	60. Office & Administrative Expense	13	8 0 5 8 1 2
44. Work Permits		0	61. Educational & Publicity Expense		6 3 4 5
45. Sale of Supplies		0	62. Professional Fees		2 1 1 3 4 4
46. Interest		1 4 9 4 1	63. Benefits	11	2 7 9 3 0 7
47. Dividends		0	64. Contributions, Gifts & Grants	12	2 3 4 1 5
48. Rents		0	65. Supplies for Resale		0
49. Sale of Investments & Fixed Assets	6	0	66. Direct Taxes		1 4 8 5 3 5
50. Loans Obtained	8	1 3 2 0 0 0	67. Withholding Taxes		1 6 1 1 7 6
51. Repayments of Loans Made	1	0	68. Purchase of Investments & Fixed Assets	7	2 4 6 6 1 5
52. On Behalf of Affiliates for Transmittal to Them		0	69. Loans Made	1	0
53. From Members for Disbursement on Their Behalf		4 1 6	70. Repayment of Loans Obtained	8	2 3 9 9 7
54. Other Receipts	14	2 8 5 4 4 7	71. To Affiliates of Funds Collected on Their Behalf		0
			72. On Behalf of Individual Members		4 1 6
			73. Other Disbursements	15	5 4 3 1 0 0
55. TOTAL RECEIPTS		4 7 4 4 4 0 8	74. TOTAL DISBURSEMENTS		4 9 5 7 3 5 9

Enter Amounts in Dollars Only -- Do Not Enter Cents

SCHEDULE 1-LOANS RECEIVABLE

List below loans to officers, employees, or members which at any time during the reporting period exceeded \$250 and list all loans to	Loans		Repayments Rece	ived During Period	Loans
business enterprises regardless of amount. (A)	Outstanding at Start of Period (B)	Loans Made During Period (C)	Cash (D)(1)	Other Than Cash (D)(2)	Outstanding at End of Period (E)
1.					
		s			
2.			,		
3.					
Totals from additional pages (if any)					
5. Totals of loans not listed above	0	0 ;	0	0	0
6. Totals of Lines 1 through 5	0	0	0	0	0
The totals from Line 6 are entered in	Item 27	Item 69	ltem 51	Item 75	
orm I M-2 (Revised 2000)	Column (A)			with Explanation	Column (B)

SCHEDULE 2 - INVESTMENTS (OTHER THAN U.S. TREASURY SECURITIES) SCHEDULE 3 - OTHER ASSETS

FILE NUMBER:	5	2	۵		a	Ω	2
FILE NUMBER.	Ų	_	J	-	IJ	O	_

Description	Amount		
(A)	(B)		
Marketable Securities			1. SECURITY D
1. Total Cost		0	2.
2. Total Book Value		0	3.
List each marketable security which has a book value over \$1,000 and exceeds 20% of Line 2.		l	4.
(a) None		0	5.
(b)			6. Total from addition
(c)			7. Total of Lines 11
(d)			The total from Line
Other Investments			SCHEDU
4. Total Cost		0	SCHEDO
5. Total Book Value		0	
6. List each other investment which has a book value over \$1,000 and exceeds 20% of Line 5. Also list each subsidiary for which separate reports are attached.			1. None
(a) None		0	2.
(b)			3
(c)			4.
(d)			5.
(e) Total from additional pages (if any)			6. Total from addition
7. Total of Lines 2 and 5		0	7. Total of Lines 1 ti
The total from Line 7 is entered in	Item 29, Column (B)		The total from Lir
orm LM-2 (Revised 2000)		I	;

Description (A)	Book Value (B)				
1. SECURITY DEPOSITS	1	0	0	8	7
2.					
3.					
4.					
5.	 				
6. Total from additional pages (if any)					
7. Total of Lines 1 through 6	1	0	0	8	7
The total from Line 7 is entered in	Item 31	I, Co	olum	n (B)

JLE 4 - OTHER LIABILITIES

Description (A)	Amount at End of Period (B)
1. None	0
2.	
3.	
4	
5	
6. Total from additional pages (if any)	
7. Total of Lines 1 through 6	0
The total from Line 7 is entered in	Item 36, Column (D)

SCHEDULE 5 - FIXED ASSETS

FILE NUMBER: 5 2 9 - 9 8 2

Description (A)	Cost or Other Basis (B)	Total Depreciation or Amount Expensed (C)	Book Value (D)	Fair Market Value (E)
1. Land (give location): None	0		0	0
2. Totals from additional pages (if any)				
3. Buildings (give location): None	0		0	0
4. Totals from additional pages (if any)				
5. Automobiles and Other Vehicles	0	0	0	0
6. Office Furniture and Equipment	4 1 5 8 8 9	213247	2 0 2 6 4 2	202642
7. Other Fixed Assets	56279	38536	17743	17743
8. Totals of Lines 1 through 7	472168	251783	2 2 0 3 8 5	220385
The total from Line 8, Column (D) is entered in			Item 30, Column (B)	

SCHEDULE 6 - SALE OF INVESTMENTS AND FIXED ASSETS

Description (if land or buildings, give location) (A)	Cost (B)	Book Value (C)	Gross Sales Price (D)	Amount Received (E)
1. None	0	0	0	0
2.				
3.				· · · · · · · · · · · · · · · · · · ·
4.				
5. Totals from additional pages (if any)				
6. Totals of Lines 1 through 5	0	0	0	0
	7. Less Reinvestments			0
	8. Net Sales			0
The total from Line 8 is entered in				Item 49

SCHEDULE 7 - PURCHASE OF INVESTMENTS AND FIXED ASSETS FILE NUMBER: 5 2 9 - 9 8 2

Description (if land or buildings, give location) (A)	Cost (B)	Book Value (C)	Cash Paid (D)
1. FURNITURE & EQUIPMENT	229466	229466	229466
2. OTHER FIXED ASSETS	17149	17149	17149
3.			
4.			
5. Totals from additional pages (if any)			
6. Totals of Lines 1 through 5	246615	246615	246615
	7. Less Reinvestments		0
	8. Net Purchases		2 4 6 6 1 5
The total from Line 8 is entered in	entropies .		Item 68

SCHEDULE 8 -- LOANS PAYABLE

Out and officers Developed Advantage	of Loans Payable at Any Loans Owed at Loans Obtained		Repayment Made	During Period		
Time During the Reporting Period (A)	Start of Period (B)	During	Dotained Period C)	Cash (D)(1)	Other Than Cash (D)(2)	Loans Owed at End of Period (E)
1. US BANK	0	6 8	8 0 0 0	1 6 9 9 8	0	5 1 0 0 2
2. US BANK	0	6 4	4 0 0 0	6 9 9 9	0	5 7 0 0 1
3						
4.						
5. Totals from additional pages (if any)						
6. Totals of Lines 1 through 5	0	1 3 2	2 0 0 0	2 3 9 9 7	0	10800
The total from Line 6 is entered in	Item 34	Iter	m 50	Item 70	Item 75 with Explanation	

SCHEDULE 9 - ALL OFFICERS AND DISBURSEMENTS TO OFFICERS

FILE NUMBER: 5 2 9 - 9 8 2

(A) Name (List all persons who held office during the reporting periodic they received no salary or other disbursements.)	d even if	Gross Salary (before taxes and		Disbursements for Official	Other		
(B) Title (Enter title of officer, such as PRESIDENT or TREASURER.)	Status (C)*	other deductions) (D)	Allowances (E)	Business (F)	Disbursements (G)	Total (H)	
CAMPBELL DANNY 1. PRESIDENT (From 1) (1/2 6/3494)	Р	4 2 2 2 8	3 0 8 1	2 1 5 4	0	47463	
KRABBE ROBERT 2. SECY-TREASURER (from 1)(102-0133/32)	P	40861	3 0 8 1	1733	0	4 5 6 7 5	
MEYER ANNE 3. VICE PRESIDENT (From 11かみ- いわかる)	P	40410	3081	1239	0	4 4 7 3 0	
WORLEY MICHELLE 4. RECORDING-SECY (Francisco de la companya de la	P	15038	2 2 5 0	401	0	17689	
MCCARTHY DENNIS 5. TRUSTEE (Fico. 1/1/12 - 0/3/22)	р	11657	1 7 5 0	2 7 0 9	0	16116	
COLLIS ANDREW 6. TRUSTEE (Fion Illian 6/3/64)	Þ	0	1 5 0 0	0	0	1500	
THOMPSON YVONNE 7. TRUSTEE (Fig. 2)22/02-6/30/02)	N	4 3 5 1	1 2 5 0	663	0	6 2 6 4	
8. Totals from additional pages (if any)		0	0	0	0	0	
9. Totals of Lines 1 through 8		154545	15993	8899	0	179437	
				10. Less Deduction	s	1 1 2 4 2	
The total from Line 11 is entered in			Item 56	11. Net Disburseme	ents 1	6 8 1 9 5	
*Code for Status (C): past officer - P; continuing officer - C; new officer during the reporting period - N. (If any officer was not elected at a regular election in accordance with your organization's constitution and bylaws, explain in Item 75.)							

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES

FILE NUMBER: 5 2 9 - 9 8 2

(A) Name (List all employees who received m from your organization and any affil (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	ore than \$10,000 in total disbursements lates.)	(be	Gros fore	e ta	ixe:	s a	nd	Allo	owa (E		es		Disbursements for Official Business (F)	Other Disbursements (G)			Tot		
ROSS 1. BASE REP NONE	F. JACQ		4	5	8	6	6	•	4	0	0 (0	2 4 1	0	: -	5	0	1	0 7
MCNEELY 2. BASE REP NONE	ASHLEY		6	0	4	3	0	1 (0	1	8 :	3	1814	0		7	2	4	2 7
KAZEMI 3. BASE REP NONE	JOANNE		5	8	0	7	4	•	6	5	8	1	1656	0		6	6	3	1 ′
SMITH 4. BASE REP NONE	катну јо		4	9	6	2	2		5	8	4	1	4 2 3	0		5	5	8	8 6
RIFFLE 5. REP/NAT CON ADM NONE	GREGORY		6	4	4	1	8	(3	5	0 (0	1 9	0		7	0	9	3 7
6. Totals from additional pages (if any)		1 1	9	3	6	4	3	8 9	9 8	8 2	2 4	1	22863	0		13	3 0	6:	3 3 (
 Totals for all employees who, during the re \$10,000 or less in total disbursements from any affiliates 	porting period, received n your organization and		2	1	4	5	8	:	2	7	1 4	4	0	0			2	4	17:
8. Totals of Lines 1 through 7		1	4 9	9 3	3 5	1	1	1 2	5	6	4 3	3	27016	0		16	4	6	17(
													9. Less Deductions	1	6	6	6	1	8
The total from Line 10 is entered in								Item 57	7				10. Net Disbursemer	nts 1 4	7	9	5	5	2

SCHEDULE 11 - BENEFITS

FILE NUMBER: 5 2 9 - 9 8 2

Description To Whom Paid (A) (B) EALTH AND WELFARE			-	oun C)	t		
1. HEALTH AND WELFARE	TRUST	2	0	9	6	6	0
2. PENSION	TRUST		6	8	9	7	7
3. OTHER INSURANCE BENEFITS	INSURANCE COMPANIES				6	7	0
4.							
5. Total from additional pages (if any)							
6. Total of Lines 1 through 5		2	7	9	3	0	7
The total from Line 6 is entered in			It∈	m 6	3	· ·	

SCHEDULE 12 - CONTRIBUTIONS, GIFTS & GRANTS

Description (A)		Am (I	ouni 3)	t		
1. CHARITABLE, CIVIC, OTHER		1	6	2	5	0
2. LABOR RELATED			1	1	5	0
3. EDUCATIONAL			2	5	4	8
4. FLOWERS, ETC.			3	4	6	7
5.						
6.	ļ					
7. Total from additional pages (if any)						
8. Total of Lines 1 through 7		2	3	4	1	5
The total from Line 8 is entered in		Ite	m 6	4		

SCHEDULE 13 - OFFICE & ADMINISTRATIVE EXPENSE

Description (A)		_	oun B)	!		
1. RENT	1	4	0	3	5	9
2. SUPPLIES/PRINTING		8	4	1	5	8
3. NEWSLETTER		8	2	4	7	8
4. POSTAGE		5	5	4	2	1
5. BANK CHARGES			2	1	5	7
6. LEASE EXPENSE		2	7	4	6	5
7. Total from additional pages (if any)	4	1	3	7	7	4
8. Total of Lines 1 through 7	8	0	5	8	1	2
The total from Line 8 is entered in	 	. Ite	m 6()		

SCHEDULE 14 - OTHER RECEIPTS

Amount Description (B) (A) 3 1 5 2 1 DC ENTER COMMISSION 2 ADMIN NWA FLIGHT LOS PAY 1 5 0 0 0 0 1 2 0 7 3 5 3. REIMB FROM INTL UNION 7 4 0 ▲ PRIOR YEAR VOIDED CHECKS 2 3 6 4 5 PRIOR YEAR HW INS REFUND 8 7 5 6 REFUND - TAXES 3 2 8 0 7 REFUND - TELEPHONE 1 0 3 3 **8 REFUND - SUPPLIES** 1 8 3 9 REFUND - POSTAGE 7 5 5 10 REFUND - LEASE EXPENSE 11 REFUND - INSURANCE 1 5 3 5 6 6 3 12 REFUND - MEETING 13 REFUND - FLIGHT LOSS 1 3 2 14. 15. 16. Total from additional pages (if any) 2 8 5 4 4 7 17. Total of Lines 1 through 16 The total from Line 17 is entered in Item 54

SCHEDULE 15 - OTHER DISBURSEMENTS

	4	6	7 9 1 1 4	3 9 2 5	7	6 4 3 8
	4	6	1	9 2 5	7	3
			1	2	2	8
				5		
			4		1	8
	·····			5	1	1
		_	4	2	6	9
			1	4	6	8
		_	4	2	6	7
			7	2	7	7
		3	0	9	7	9
····						
						
	5	4	3	1	0	0
			5 4	5 4 3	3 0 9	5 4 3 1 0

ORGANIZATION NAME: TEAMSTERS AFL-CIO	
ENDING DATE OF PERIOD COVERED: 12/31/2002	

SCHEDULE 9 – ALL OFFICERS AND DISBURSEMENTS TO OFFICERS (continued)

(A) Name (List all persons who held office during the reporting period every they received no salary or other disbursements.)	n if	Gross Salary (before taxes and		Disbursements for Official	Other	
(B) Title (Enter title of officer, such as PRESIDENT or TREASURER.)	Status (C)*	other deductions) (D)	Allowances (E)	Business (F)	Disbursements (G)	Total (H)
THOMPSON YVONNE	-	0	0	0	0	0
TRUSTEE	P					
		1				
		<u>, , , , , , , , , , , , , , , , , , , </u>				
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			<u>=</u>			
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FILE NUMBER: 5 2 9 - 9 8 2

ORGANIZATION NAME:
TEAMSTERS AFL-CIO
ENDING DATE OF PERIOD COVERED:
12/31/2002

(A) Name (List all employees who from your organization) (B) Position (Enter employee's jo	o received more than \$10,000 in total disbursements and any affiliates.) b title.)	Gross Salary (before taxes and other deductions)				Allowances			e	Disbursements for Official Business	Other Disbursements			Γota	 I				
(C) Name of Affiliated Organ	nization (if applicable)			D)		,		AllC	(E)		5	(F)	(G)			(H)			
SANDVIK	KATHLEEN		6	0	1 8	3 8		6	5 5	0	0	6 6	0		6	6	7	5 4	
BASE REP																			
NONE												j	Í						
PETERSON	ALLEN		6	1 (6 5	5 9	-		5 5	0	0	8 4 8	0		6	9	 O	0 7	
BASE REP							1												
NONE		:																	
SMATANA	ERIC	·	6	0 .	7 3	3 2			5 5	0	0	0	0	·	6	7 :	2	3 2	-
BASE REP																			
NONE																			
DOUGHERTY	TIM		5	7 :	3 (3		6	5 5	0	0	1 5 2	0		6	3 9	9	5 5	-
BASE REP												;							l
NONE																			
GEORGE	PATRICIA		3	5	1 7	7 4					0	4 9	0		3	5 2	2	2 3	
SECRETARY												ļ							
NONE														Ē					

FILE NUMBER:	_	2	0	Ω	0	2
TIEL NOMBER.	7	_	9	J	v	_

ORGANIZATION NAME:
TEAMSTERS AFL-CIO
ENDING DATE OF PERIOD COVERED:
12/31/2002

nore than \$10,000 in total disbursements filiates.)	(before	ta>	(es	and				•		Disbursements for Official	Other						
				ions))			ces		Business	Disbursements						
(if applicable)	<u> </u>	(ט)				(E	Ξ)			(F)	(G)	<u></u>	_	(H)			
TARA	3	9	2	8 8	2				0	7 7	0		3	9	3	5	9
											ļ						
JOSEPH	4	9	1	4	2	6	5	0	0	1497	0		5	7	1	3	9
PATRICIA	5	9	6	1	1	6	5	0	0	884	0		6	6	9	9	5
										i	,						
JEFFREY	5	0	7	7	9	5	0	8	1	7 5 5	0		5	6	6	1	5
	li:									T.							
JEFFREY	3	3	2	0	4	3	0	0	0	1 1 4 5	0		3	7	3	4	9
																	ļ
	(if applicable) TARA JOSEPH PATRICIA JEFFREY	(if applicable) TARA JOSEPH PATRICIA JEFFREY 5	(if applicable) (before tax other deduction (D) TARA 3 9 JOSEPH 4 9 PATRICIA 5 9 JEFFREY 5 0	(if applicable) TARA JOSEPH PATRICIA JEFFREY 5 0 7	(if applicable) TARA 3 9 2 8 JOSEPH 4 9 1 4 PATRICIA 5 9 6 1 JEFFREY 5 0 7 7	(if applicable) (before taxes and other deductions) (D) TARA 3 9 2 8 2 JOSEPH 4 9 1 4 2 PATRICIA 5 9 6 1 1 JEFFREY 5 0 7 7 9	(if applicable) (If applicable	(if applicable) (before taxes and other deductions) (D) (E) TARA 3 9 2 8 2 JOSEPH 4 9 1 4 2 6 5 PATRICIA 5 9 6 1 1 6 5 JEFFREY 5 0 7 7 9 5 0	(before taxes and other deductions) (D) Allowances (E) TARA 3 9 2 8 2 JOSEPH 4 9 1 4 2 6 5 0 PATRICIA 5 9 6 1 1 6 5 0 JEFFREY 5 0 7 7 9 5 0 8	(#applicable) (before taxes and other deductions) (D) Allowances (E) TARA 3 9 2 8 2 0 JOSEPH 4 9 1 4 2 6 5 0 0 PATRICIA 5 9 6 1 1 6 5 0 0 JEFFREY 5 0 7 7 9 5 0 8 1	(before taxes and other deductions) (D) Allowances (E) TARA 3 9 2 8 2 0 7 7 JOSEPH 4 9 1 4 2 6 5 0 0 1 4 9 7 PATRICIA 5 9 6 1 1 6 5 0 0 8 8 4	(before taxes and other deductions) (I) Allowances (E) for Official Business (G) TARA 3 9 2 8 2 0 7 7 7 0 JOSEPH 4 9 1 4 2 6 5 0 0 1 4 9 7 0 PATRICIA 5 9 6 1 1 6 5 0 0 8 8 4 0 JEFFREY 5 0 7 7 9 5 0 8 1 7 5 5 0	Chefore taxes and other deductions Allowances For Official Business Chefore taxes and other deductions Chefore t	(before taxes and other deductions) (D) Allowances (E) (F) (G) (G) (G) TARA 3 9 2 8 2 0 7 7 0 3 JOSEPH 4 9 1 4 2 6 5 0 0 1 4 9 7 0 5 PATRICIA 5 9 6 1 1 6 5 0 0 8 8 4 0 6 JEFFREY 5 0 7 7 9 5 0 8 1 7 5 5 0 5	Chefore taxes and other deductions	(before taxes and other deductions) (D) Allowances (E) For Official Business (G) (G) (H) TARA 3 9 2 8 2 0 7 7 7 0 3 9 3 JOSEPH 4 9 1 4 2 6 5 0 0 1 4 9 7 0 5 7 1 PATRICIA 5 9 6 1 1 6 5 0 0 8 8 4 0 6 6 9 JEFFREY 5 0 7 7 9 5 0 8 1 7 5 5 0 5 6 6	Composition Composition

SANIZATION NAME:	FILE NUMBER: 5 2 9 - 9 8 2
AMSTERS AFL-CIO	
ING DATE OF PERIOD COVERED:	

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who receifrom your organization and at (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization		Gro (befo other	de	axe	es a	and		Allov (wa (E)		es	Disbursements for Official Business (F)	Other Disbursements (G)			ota H)			
GRAYS BASE REP NONE	BYRON		5	5	2	6	3	6	5	5 () C	6 5	0	6	3	1 8	3	2	8
DAMIS BASE REP NONE	ANDREW		5	2	0	2	8	5	C		 3 1	1016	0	Ę	5 8	3	1	2	5
CALLISON BASE REP NONE	RUSSELL		5	6	6	7	8	6	5	5 8	 3 1	867	0	6	§ 4	4	1	2	6
HANSEN BASE REP NONE	DANA		5	1	0	1	5	5	C) 8	 3 1	7 3 5	0	5	5 6	6 8	3	3	1
THOMPSON BASE REP NONE	RANDALL		1	1	1	9	0	2	2	. 5	5 0	7 8 4	0	1	4	1 2	2	2	4

12/31/2002

ORGANIZATION NAME: TEAMSTERS AFL-CIO	
ENDING DATE OF PERIOD COVERED: 12/31/2002	

(A) Name (List all employees who received more from your organization and any affiliate. (B) Position (Enter employee's job title.)	than \$10,000 in total disbursements s.)	Gr (befo	r de	axe: duct	s an		Al	lowa	nces	s	Disbursem for Offici Busines	al	Other Disbursements		7	ota			
(C) Name of Affiliated Organization (# 2	applicable)])	D)				(E)		(F)		(G)			(H)			
GLOEGE	STEPHEN		2	1 7	7 1	1				0		7 8	0		2	1	7	8	9
BOOKKEEPER) 		1	Ì					
NONE																			Ì
VEVERICA	JOANNE		3	8 7	7 1	7				0		1 3	0	,	3	8	7	3	0
OFFICE MANAGER											!		<u>.</u>						
NONE		į																	ļ
ELLIOTT	JEANNE		1	3 3	3 0	7		1 5	5 0	0	1 1	1 3	0		1	5	9	2	0
SAFETY COMMITTEE														ļ					
NONE																			
LUCAS	SALLY	 	1 :	3 5	5 0	6		2 (0	0	4	3 6	0		1	5	9	4	2
MASP COMMITTEE																			
NONE		1									i								
WITHERSPOON	BONNIE		1 4	4 2	2 0	4		2 0	0	0	2 3	5 7	0		1	8	5	6	1
MASP COMMITTEE											!								
NONE																			

FILE NUMBER: 5 2 9 - 9 8 2	FILE NUMBER:	5	2	9	_	9	8	2
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ORGANIZATION NAME:
TEAMSTERS AFL-CIO
ENDING DATE OF PERIOD COVERED:
12/31/2002

(A) Name (List all employees who received m from your organization and any affil (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	ore than \$10,000 in total disbursements iates.) (if applicable)	Gros (before other d	tax	es ictic	and		Allowa (E)		es		Disbursements for Official Business (F)	Other Disbursements (G)		ota (H)]		
ROGIN SAFETY COMMITTEE NONE	LAUREL	1	4	1	5	1	1 5	5	0 (o	0	0	1	5 (3	5 <i>'</i>	1
MCMAHON SAFETY COMMITTEE	NEAL	1	4	1	5 8	8	1 5	5	0 ()	0	0	1	5 (3	5 8	3
EISENSTEIN MASP COMMITTEE NONE	MARY	1	4	7	5 2	2	2 0)	0 (ר	5 3 7	0	1	7 2	2	8 9)
CHOH BASE REP NONE	SANDRA	1	7	8	7 (D	3 2	2	5 ()	3 3 5	0	2	1 4	1	 5	5
ATCHISON COMMUMIC COORD NONE	RON	2	0	9	9 7	7			C)	0	0	2	0 9	•	9 7	-

ORGANIZATION NAME:			
TEAMSTERS AFL-CIO		 	
ENDING DATE OF PERIOD COVERED:	-		
12/31/2002			

(A) Name (List all employees who received more from your organization and any affiliate (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization (if		Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
MAUREN SECRETARY	JENNIFER	1 2 2 7 2	0	0	0	1 2 2 7 2
NONE						
RETRUM ASST TO TRUSTEE NONE	BRUCE	16645	0	0	0	16645
REILEY TRUSTEE NONE	MOLLIE	31886	3500	1664	0	37050
BARROW-WEST ASST TRUSTEE NONE	DAVID	3 1 9 0 5	0	5 4 5 9	0	37364
ANSELMO ASST TO TRUSTEE NONE	DIANE	1 3 2 4 2	0	0	0	13242

ORGANIZATION NAME:			
TEAMSTERS AFL-CIO			
ENDING DATE OF PERIOD COVERED	:		
12/31/2002			

(A) Name (List all employees who received mon from your organization and any affiliate (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization (i)	e than \$10,000 in total disbursements fes.)	Gro (befo other		ixe: luct	s and		Allowances (E)	Disburseme for Officia Business	d	Other Disbursements (G)	}	Tot (H			
	- upproducty					╣		(F)				•		_	\dashv
MCCANN SECRETARY NONE	CASEY	i i	3 8	3 1	1 5	0	0	2	2 3	0	3	8 8	1	7	3
MAY	LAWANA		4 ;	3 5	5 5	7	0	6 7	 7	0	4		2	3	2
TITAN OPERATOR															
CHAPDELAINE	KAREN		3 6	S 5	5 4	9	0	Ę	5 1	0	3	3 6	6	0	0
NONE															
WHITE SECRETARY	CHRISTINE		1 9	3 6	3 1	6	0		5	0	1	9	8	6	1
NONE															
KOTRYS SECRETARY NONE	GREGORY		3 3	3 C	0 0	0	0	113	7	0	3	3 4	1	3	7
								_ <u></u>				_	_		

ORGANIZATION NAME:		_	
TEAMSTERS AFL-CIO	_	 	
ENDING DATE OF PERIOD COVERED:			
12/31/2002			

SCHEDULE 13 - OFFICE & ADMINISTRATIVE EXPENSE (continued)

Description (A)			ount 3)	:		
TELEPHONE	1	4	4	0	7	2
MACHINE MAINTENANCE		1	2	5	9	6
GENERAL INSURANCE		1	8	2	7	2
SURETY BOND PREMIUM			1	7	0	0
INTERNET EXPENSE		8	5	8	8	1
HOTEL & TRAVEL PD TO VENDOR	1	5	1	2	5	3
						_
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ORGANIZATION NAME:		
TEAMSTERS AFL-CIO		
ENDING DATE OF PERIOD COVERED:		
12/31/2002		

75. ADDITIONAL INFORMATION (continued)

THE BEACON FOUNDATION, INC. 41-1939919
517 SPRUCE STREET
FARMINGTON, MN 55024

THIS PLAN PROVIDES BENEFITS FOR MEMBERS.

ORGANIZATION NAME: TEAMSTERS AFL-CIO	
ENDING DATE OF PERIOD COVERED: 12/31/2002	

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75. AD	DITIONAL INFORMATION	ON
Item Number		
13	DEPRECIATION EXPENSE:	
	OFFICE FURNITURE AND EQUIP OTHER FIXED ASSETS	\$61,956 4,924
	TOTAL	\$66,880
	THE REMOVED OFFICERS DISPOSED INVOLVED.	OF FIXED ASSETS WITH A COST OF \$189,834 AND A BOOK VALUE OF \$7,424. NO CASH WA
	THE CURRENT TRUSTEES DISPOSED INVOLVED.	OF FIXED ASSETS WITH A COST OF \$10,598 AND A BOOK VALUE OF \$0. NO CASH WAS
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ORGANIZATION NAME:	 	
TEAMSTERS AFL-CIO	 	 _
ENDING DATE OF PERIOD COVERED:		
12/31/2002		

em Number 14	ECACY PROCESSIONALS LID CERTICIED RURI IC ACCOUNTANTS
14	LEGACY PROFESSIONALS LLP, CERTIFIED PUBLIC ACCOUNTANTS
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LM-2 (Revised	2000) 3 - 175

ORGANIZATION NAME:			
TEAMSTERS AFL-CIO			
ENDING DATE OF PERIOD COVERED:	 	 	
12/31/2002			

75. AD	DITIONAL INFORMATION (continued)
item Number	CHORTLY AFTER THE TRUCTERSHIP WAS IMPOSED, IT WAS DISCOVERED THAT SERTAIN LOCAL LINEAR DESCRIPTION
	SHORTLY AFTER THE TRUSTEESHIP WAS IMPOSED, IT WAS DISCOVERED THAT CERTAIN LOCAL UNION RECORDS, FILES, COMPUTER EQUIPMENT AND SOFTWARE, KEYS, FURNITURE, PHOTOGRAPHIC EQUIPMENT AND OTHER LOCAL UNION PROPERTY IS BEING PURSUED BY THE UNION IN THE FORM OF A COUNTERCLAIM AGAINST THE REMOVED OFFICERS IN A LAWSUIT PENDING IN FEDERAL COURT.
	THE PROPERTY AND EQUIPMENT LISTED ABOVE WILL BE REMOVED FROM THE FIXED ASSET LIST, IF APPLICABLE, ONCE THE LAWSUIT HAS BEEN RESOLVED.
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ORGANIZATION NAME:	
TEAMSTERS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	
12/31/2002	

12/31/200	<u></u>
75. AD	DITIONAL INFORMATION (continued)
Item Number 19	THE LOCAL WAS PLACED IN TRUSTEESHIP EFFECTIVE 6/30/02. THE GENERAL PRESIDENT AND THE GENERAL SECRETARY-TREASURER OF THE INTERNATIONAL BROTHERHOOD OF TEAMSTERS WILL BE SIGNING THIS LM-2 AS WELL AS THE
	TWO TRUSTEES APPOINTED TO OVERSEE THE LOCAL. WHEN THE LOCAL WAS PLACED IN TRUSTEESHIP, ALL OFFICERS WERE REMOVED AND THE AFFAIRS OF THE LOCAL ARE BEING
	CONDUCTED BY TRUSTEE MOLLIE REILEY AND ASSISTANT TRUSTEE DAVID BARROW-WEST, WHO WERE APPOINTED BY THE INTERNATIONAL.
	THE INTERNATIONAL HAS NOT YET DETERMINED WHEN THE TRUSTEESHIP WILL END, NOR WHEN THE NEXT ELECTION WILL TAKE PLACE.

ORGANIZATION NAME:	
TEAMSTERS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	
12/31/2002	

m Number	DITIONAL INFORMATION (continued)
22	THE INTERNATIONAL BROTHERHOOD OF TEAMSTERS CONVENED A SPECIAL CONVENTION DURING THE 2002 YEAR. AS A RESULT OF ACTIONS TAKEN DURING THE CONVENTION, THE CONSTITUTION OF THE INTERNATIONAL WAS AMENDED. THE INTERNATIONAL HAS NOTIFIED EACH OF ITS LOCAL UNIONS OF ITS INTENT TO FILE THE NEW CONSTITUTION WITH THE DEPARTMENT OF LABOR ON BEHALF OF ITS AFFILIATES.
	THE LOCAL UNION CHANGED ITS BY-LAWS DURING 2002.
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ORGANIZATION NAME:		
TEAMSTERS AFL-CIO		
ENDING DATE OF PERIOD COVERED:		
12/31/2002		

Item Number	
23	THE REMOVED OFFICERS ARRANGED FOR THE TWO LOANS FROM US BANK, WHICH ARE SECURED BY THE ASSETS THEY WERE
	USED TO PURCHASE, A COMPUTER NETWORK SYSTEM AND A TELEPHONE SYSTEM.
n LM-2 (Revis	ed 2000) 6 - I75

ORGANIZATION NAME: TEAMSTERS AFL-CIO	 	
ENDING DATE OF PERIOD COVERED: 12/31/2002	 	

75. AD	5. ADDITIONAL INFORMATION (continued)				
Item Number					
	THE OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION LOCAL 12 AND LOCAL 42 CONTRACTS COVERING CLERICAL EMPLOYEES PROVIDES THAT UPON PERMANENT LAYOFF OR TERMINATION, AS DEFINED IN THE CONTRACT, AN OFFICE EMPLOYEE WHO HAS ESTABLISHED SENIORITY SHALL BE ENTITLED TO DISCHARGE AND DISMISSAL PAY EQUAL TO ONE WEEK'S PAY FOR EACH YEAR OF SERVICE UP TO A MAXIMUM OF FIVE WEEKS. AS OF DECEMBER 31, 2002, THE FUTURE LIABILITY AMOUNTED TO APPROXIMATELY \$20,000.				
	THE LOCAL PREMATURELY TERMINATED THEIR LEASE AT 2850 METRO DRIVE TO MOVE TO THEIR CURRENT LOCATION AT 8009 34TH AVENUE SOUTH. THE FORMER LANDLORD HAS THREATENED TO FILE SUIT FOR BREACH OF THIS LEASE. THE POTENTIAL LOSS AS A RESULT OF THIS CLAIM IS APPROXIMATELY \$16,000.				

ORGANIZATION NAME: TEAMSTERS AFL-CIO	
ENDING DATE OF PERIOD COVERED: 12/31/2002	

Item Number	
	CONTRIBUTIONS FROM THE INTERNATIONAL BROTHERHOOD OF TEAMSTERS FOR THE PERIOD 6/30/02 - 12/31/02.
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ORGANIZATION NAME: TEAMSTERS AFL-CIO			
ENDING DATE OF PERIOD COVERED: 12/31/2002	 		 _

n Number	
30	SCHEDULE 5, COLUMN E - FAIR MARKET VALUE
	THE LOCAL DOES NOT PERIODICALLY APPRAISE ITS ASSETS TO DETERMINE THEIR FAIR MARKET VALUE. THE BOOK VALUE O THE LOCAL'S ASSETS HAVE BEEN REPORTED AS A GOOD FAITH ESTIMATE OF THE FAIR MARKET VALUE.
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	CIO COVERED:	

ANDREW DAMIS DANA HANSEN STEPHEN GLOEGE FILE NUMBER: 5 2 9 - 9 8 2

	75. ADDITIONAL INFORMATION (Continued)				
1	Item Number		· · · · · · · · · · · · · · · · · · ·		
		THE AMOUNTS IN COLUMN D REPRESENT KATHLEEN SANDVIK ALLENPETERSON ERIC SMATANA TIM DOUGHERTY ASHLEY MCNEELY	13 MONTHS PAY FOR THE FOLLOWING PEOPLE: JOANNE KAZEMI GREGORY RIFFLE PATRICIA RELLER BYRON GRAYS RUSSELL CALLISON		
		THE FOLLOWING PEOPLE CEASED EMPLO F. JACQUELINE ROSS CHRISTINE WHITE JEFFREY GARDNER JEFFREY HARPER	YMENT DURING THE YEAR:		

ORGANIZATION NAME:	-	
TEAMSTERS AFL-CIO		
ENDING DATE OF PERIOD COVERED:	<u> </u>	
12/31/2002		

75. ADDITIONAL INFORMATION (continued)

Item Number	
72	THIS REFLECTS ONLY DISBURSEMENTS ON BEHALF OF INDIVIDUAL MEMBERS FOR OTHER THAN NORMAL OPERATING PURPOSES. ALL OF OUR EXPENSES BENEFIT THE ENTIRE UNION MEMBERSHIP AND INDIVIDUALS ARE NOT NORMALLY SINGLED OUT FOR SPECIAL BENEFITS.
m LM-2 (Revise	2d 2000)

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ORGANIZATION NAME:		,	
TEAMSTERS AFL-CIO			
ENDING DATE OF PERIOD COVERED:			
12/31/2002			

THE SECRETARY-TREASURER IS THE CHIEF FINANCIAL OFFICER OF THE LOCAL.	UE GEODET	TADV TOFAC	CUDED IS TUE	CHIEF FINANC	IAL OFFICER OF	THELOCAL		
	ne seuke i	IART-IREAS	SURER IS THE	CHIEF FINANC	IAL OFFICER OF	THE LUCAL.		
m LM-2 (Revised 2000) 11 - 175							 	

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ORGANIZATION NAME:			
TEAMSTERS AFL-CIO		 	
ENDING DATE OF PERIOD COVERED:			
12/31/2002			

TRUSTEE SIGNATURES

Each of the undersigned, duly authorized officers	of the above labor organization, declares, under the app	licable penalties of law, that all of t⋈e inførmation submitted in this report (including the information contained in ar
accompanying documents) has been examined by	the signatory and is, to the best of the undersigned's ki	nowledge and belief, true, correct and complete. (See Section VI on penalties in the instructions.)
Trustee Sign:	TRUSTEE	Trustee Sign: TRUSTEE

Trustee Sign:

952/85/4-2738 Telephone Number

Telephone Number

952-854-2738